

Integrating individual experience and environmental realities

November 16, 2021

8:45AM-9:00AM	Welcome
9:00AM-9:55AM	Panel: Social Determinants of Mental Health Among Immigrant Populations
	Stephanie Nuñez: Generation Hispanics: Examining Discrimination, Region of Origin and Mental Health and Substance Use Outcomes
	Supriya Pandit: Comparing The Moderating Effects of Racial and Ethnic Minority Status and Immigrant Status On The Association Between Race-Based Rejection Sensitivity And Social Phobia
9:55AM-10:00AM	Break
10:00AM-10:50AM	Panel: From the Outside In: The Impact of Covid-19 and Environmental Pollution on Psychological Development
	Shannique Richards: COVID-related Stress as a Moderator of College Students' Cannabis use and Internalizing Symptoms
	Kait Kearney: Prenatal Exposure to Environmental Pollution and Temperament in Infancy: Does Sex Matter?
10:50AM-11:00AM	Break
11:00AM-12:15PM	KEYNOTE: Individual Cultural Assessment and Treatment Engagement Roberto Lewis-Fernández, MD Professor of Clinical Psychiatry at Columbia College of Physicians and Surgeons Director of the NYS Center for Excellence for Cultural Competence and the Hispanic Treatment Program Co-Director of the Anxiety Disorders Clinic NYS Psychiatric Institute
12:15PM-12:30PM	Break (return with your lunch)
12:30PM-1:45PM	Lunch & Poster Session (Breakout rooms)



Generation Hispanics: Examining Discrimination, Region of Origin and Mental Health and Substance Use Outcomes

S.M. Nuñez, & D.M. Anglin

Aim Hispanic / Latine individuals represent a very heterogenous group considering immigrant status and region of origin. Yet, within-group diversity, particularly among 1.5-generation immigrants (i.e., those who immigrated before age 13), is rarely captured in psychological research. The purpose of this study is to closely examine the role of age at immigration, frequency of discrimination, and region of origin on mental health and substance use outcomes among Hispanic emerging adults in the U.S.

Methods An analytical sample of 508 majority female participants was selected from a larger correlational study sample based on self-reported Hispanic / Latine identity and immigration status. Age at immigration among immigrants was grouped accordingly: 0-5, 6-12, >13 years. Region of country of origin grouped as: South American, Central American, and Caribbean for the entire sample. Self-reported measures were used to capture experiences of discrimination (EOD), recent alcohol and cannabis use (Drug Use Frequency Questionnaire), depression symptoms (Center for Epidemiological Studies-Depression), and anxiety symptoms (State Trait Anxiety Inventory).

Results Analyses of Variance (ANOVA) revealed that participants who emigrated to the U.S. after the age of 13 reported lower anxiety than those that immigrated at younger ages, and lower than second-generation immigrants, F(3, 484) = 4.10, p = 0.007. For first-generation immigrants specifically, discrimination varied by region of origin with those from Central American countries experiencing significantly greater discrimination than those from Caribbean and South American countries, F(2,164) = 5.92, p = 0.003. There were no significant differences across age of immigration or region of country of origin in degree of substance use.

Conclusion Taken together, these findings suggest that even within a younger population, age at immigration better distinguishes which young Hispanic individuals may be at higher risk for anxiety. Those born abroad, but mainly reared in the U.S., may lack protective factors and have greater risk exposures. Although differences in discrimination across immigration ages were not found, Hispanic individuals from Central American countries were at greater risk for such exposure. Identifying region/country of origin and age at immigration is critical for more precisely capturing the psychological experiences of young Hispanic individuals.



Comparing The Moderating Effects of Racial and Ethnic Minority Status and Immigrant Status On The Association Between Race-Based Rejection Sensitivity And Social Phobia

Supriya Pandit, M.A.; Ashley Feng, B.A.; Deidre Anglin, Ph.D.

Social phobia is a pressing mental health concern that significantly impacts younger populations. In addition to the plethora of financial, health, and social difficulties that likely enhance social phobia for younger racial and ethnic minority (REM) and immigrant populations, these populations often remain vigilant to socially rejecting situations involving race. In particular, race-based rejection sensitivity (RS-race) has been identified as a salient factor linked to higher levels of social phobia, though empirical verification of this association in these populations remains mixed. Variations in the impact of RS-race on social phobia may be partly due to differences in immigrant status, racial and ethnic status, experiences of discrimination, and perceived stress. Accordingly, the present study aimed to comparatively assess the associations between RSrace and social phobia in a multi-ethnic sample (N = 1507; $M_{\text{acc}} = 20$), and further investigated the role of experiences of discrimination and perceived stress in influencing the association between these variables. Linear regression analyses revealed the most positive and strongest magnitude in association between RS-race and social phobia for first-generation U.S. immigrants and Asians. Hierarchical linear regression analyses indicated that identifying as Hispanic or Asian with higher RS-race predicted higher social phobia. Findings shed light on particular vulnerabilities certain racial/ethnic groups have for social phobia, in the context of racially discriminating and stressful environments. The development of interventions and/or social policies to bolster the social adjustment and wellbeing of these at-risk populations is warranted.

Keywords: race-based rejection sensitivity, social phobia, immigrants, racial and ethnic minorities, experiences of discrimination, perceived stress.



COVID-related Stress is a Moderator of College Students' Cannabis use and Internalizing Symptoms Shannique Richards, MA., Sarah O'Neill, Ph.D.

Aim: How does stress related to SARS-CoV-2 interact with cannabis use to affect internalizing symptoms among a diverse sample of college students? **Methods:** N=81students (66.7% female) aged 18-25 years [mean=19.41 (SD=2.18) years] were recruited from a large, public, urban campus in the northeast US. The sample was ethnically (25% Latinx), racially (77.8% BIPOC) and socioeconomically diverse (family HHI<\$60,000/year for 62.8%). Participants self-reported frequency of past week cannabis use and consequences of its consumption (lower energy levels, depression and anxiety severity). They also completed the COVID Stress Scales, which measured COVID-related distress across six domains. Of these, COVID traumatic stress symptoms ("COVID Trauma") and fear of the social and economic consequences of COVID ("COVID SEC") were correlated with greater internalizing symptoms and served as moderators in subsequent analyses. Individual moderation models run using Hayes' PROCESS tested whether "COVID Trauma" and "COVID SEC" moderated the association between frequency of cannabis use and internalizing symptom severity. **Results:** 19% consumed cannabis on at least one day of the previous week. COVID Trauma (b=.16; 95% CI=.03-.30) and COVID SEC (b=.26; 95% CI=.05-.47) moderated the relation between frequency of cannabis use and lower energy. COVID SEC also moderated the relation between frequency of cannabis use and depression (b=6.15; 95% CI=1.57-10.74) and anxiety (b=3.02; 95% CI=.38-5.65). Conclusion: The double hit of greater frequency of cannabis use and COVID-related distress, particularly traumatic stress and fear of the social/economic fallout, amplified internalizing symptoms for college students. Intervention should target both substance use and the context in which it occurs.



Prenatal Exposure to Environmental Pollution and Temperament in Infancy: Does Sex Matter?

Kearney, K., O'Neill, S. and Nomura, Y.

In the last ten years, fine particulate air pollutants have increased not decreased as other pollutants did. These increased rates of pollution disproportionately affect communities of color and low socioeconomic status. Recent studies have linked prenatal exposure to air pollution to later psychopathology. This study investigated: (i) whether prenatal exposure to environmental air pollution is related to later infant temperament, a key risk factor for later psychopathology, and (ii) if the association is moderated by child sex. N=76 mother-child dyads were recruited into a longitudinal study examining stress in pregnancy. Prenatal exposure to air pollution (PM2.5) was obtained from The New York City Community Air Survey (NYCCAS) and reflects levels of air pollution in mother's zip code during the second trimester of pregnancy. Mothers completed the Infant-Toddler Social and Emotional Assessment (ITSEA) annually at three postnatal time points (18, 24, and 36 months) to assess children's temperament (Externalizing, Internalizing, Dysregulation) over time. Scores for each domain were averaged across the three time points. Separate moderation analyses using Hayes' (2018) PROCESS were carried out. First, the effect of environmental air pollution x child sex interaction on each temperament domain. Second, analyses were re-run adding in several a priori confounders. Higher PM2 levels during pregnancy were associated with more severe Externalizing behaviors in early childhood, but only for males. Findings remained significant after adjusting for covariates. No other significant findings were obtained. Findings may allow preliminary understanding of the consequences of prenatal exposure to air pollution on endophenotypes for later childhood psychopathology, buttress public policy for pollution, and inform early intervention for vulnerable mothers and children.